

PART B - FEE(S) TRANSMITTAL

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22850 7590 06/15/2005

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(Depositor's name)

(Signature)

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/717,466 | 11/21/2003 | Pierre Ramillon | 245508US41X DIV | 8125 |

TITLE OF INVENTION: SYSTEM FOR IDENTIFYING A SIGNAL SOURCE
08/31/2005 MBEYENE2 00000147 10717466

01 FC:1501 1400.00 OP

| 02 FC:1501 APPN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|-----------------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 09/15/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|--------------|----------|----------------|
| DESTA, ELIAS | 2857 | 702-076000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 ORLON, SPIVAK,

2 McCLELLAND, MAIER

3 & NEUSTADT, P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

AIRBUS FRANCE S.A.S.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Toulouse, FRANCE

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 51500030 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Joseph Scafetta Jr.

Typed or printed name

Date

AUG 29 2005

Reg. No. 26,803

Registration No.

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